

PTO/SB/21 (09-96)
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Inder the Paperwork I	Reduction Act of 1995, no pers	ons are required to res	Application Number	ation	10/622,417-Conf. #4150						
TRANSMITTAL FORM			Filing Date		July 18, 2003						
			First Named Inventor		Céline Mas						
			Art Unit		2628						
(to be used for all солтеѕропdепсе after initial filing)			Examiner Name		J. Hsu						
Total Number of Pages in This Submission 6			Attorney Docket Number		S1022.81026US00						
ENCLOSURES (Check all that apply)											
X Fee Transm	nittal Form	Drawing(s)			After Allowance Communication to TC						
X Fee A	ttached	Licensing-rel	nsing-related Papers		Appeal Communication to Board of Appeals and Interferences						
Amendment/Reply		Petition			X Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final		Petition to Convert to a Provisional Application			Proprietary Information						
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address			Status Letter						
X Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please Identify below):						
Express Abandonment Request		Request for Refund									
Information Disclosure Statement		CD, Number of CD(s)									
Certified Copy of Priority Document(s)		Landscape Table on CD									
Reply to Missing Parts/ Incomplete Application		Remarks									
Reply to Missing Parts under 37 CFR 1.52 or 1.53											
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
	WOLF, GREENFIELD & SACKS, P.C.										
Signature	Ma										
Printed name	dames H. Morris				,						
Date	March 2, 2007		Reg. No.	3	4,681						
Certificate of Mailing Under 37 CFR 1.8(a)  I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  Dated: March 2, 2007 Signature: Patricia L. Marchetti)											

PTO/SB/17 (07-06)

Name (Print/Type) James H	I. Morris					Date	March 2	, 2007					
Signature	Tmor		*	Registration No. (Attorney/Agent)	34,681	Telephone	(617) 64	6-8000					
SUBMITTED BY													
Other (e.g., late filing s		401 Notice of 253 Extension		ponse within th	ird month	1		0.00 20.00					
Non-English Specificat				ount)			EO	0.00					
4. OTHER FEE(S)							Fees	Paid (\$)					
		/50	_	(round up to a who			=						
sheets or fraction there	eof. See 35 U			37 CFR 1.16(s). Iditional 50 or frac	tion thereo	f Fee (\$)	Fee I	Paid (\$)					
If the specification and di listings under 37 CFR	rawings exceed 1.52(e)), the	application size	e fee du	e is \$250 (\$125 f	onically fil or small e	led sequence or ntity) for each a	computer dditional 50	)					
HP = highest number of indepe  3. APPLICATION SIZE FE	·	a tor, if greater than	. <b>.</b> .					_					
2 -7 =	X	=											
Indep. Claims Extra	Claims	Fee (\$)	Fee P	aid (\$)									
HP = highest number of total cla	aims paid for, if g	reater than 20.						<del>-</del>					
<u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee F</u>			ree P	aiu (\$)		e (\$) Fee Paid (\$)							
Multiple dependent claims		F = - (A)	<b>-</b>	-: /¢\	g.a.	ultinla Danas da	360	180					
Each independent claim or		ng Reissues)					200	100					
Each claim over 20 (include	_	•					50	25					
Fee Description							Fee (\$)	Fee (\$)					
2. EXCESS CLAIM FEES	200	.00	v	•	ŭ	•		Small Entity					
Provisional	200	100	0	0	0	0							
Plant Reissue	200 300	100 150	500	250	600	300							
Design	200	100	100 300	50 150	130 160	65 80							
Utility	300	150	500	250	200	100		<del></del>					
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)						
I. BASIC FILING, SEARC		IG FEES		RCH FEES	EXAMIN	IATION FEES							
1. BASIC FILING, SEARC	H AND EYA!	MINATION FEE	<u>s</u>	· · · · · · · · · · · · · · · · · · ·			<del></del>						
FEE CALCULATION	37 CFR 1.16	and 1.17					-						
X Charge any a	dditional fee(	s) or underpayn	nents of	x Credit	any overpa	ayments							
Charge fee(s	) indicated be	low		Charge	e fee(s) ind	licated below, ex	cept for th	e filing fee					
For the above-iden	tified deposit	account, the Dir	ector is	hereby authorize	d to: (chec	k all that apply)							
Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.													
x Check Credit Card Money Order None Other (please identify):													
METHOD OF PAYMENT (check all that apply)													
TOTAL AMOUNT OF PAY	MENT	(\$) 1,520.00	)	Attorney Docket I	No.	S1022.81026L	JS00						
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2628									
For FY 2006				Examiner Name J.		. Hsu							
						Céline Mas							
FEE TRANSMITTAL				Filing Date July 18, 2003									
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known Application Number 10/622,417-Conf. #4150									
Under the Paperwork Redu	respond to a collection of information unless it displays a valid OMB control number.												
	THE STATE OF THE S				and Tradem	ed for use through ark Office; U.S. DEF	01/31/2007. C PARTMENT O	F COMMERCE					

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Dated: March 2, 2007

Signature: Patricia L. Marchetti (Patricia L. Marchetti)